

# State Elected Official Financial Disclosure Form

Name of Official: Andrea A. Clifford

Office Held: Representative

Senate District (if applicable): \_\_\_\_\_

House District (if applicable): 33

Business Address: P.O. Box 2022

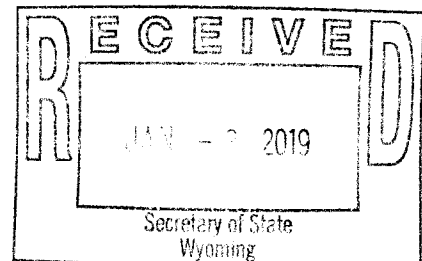
Business City, State and Zip: Riverton, WY 82501

Business Phone: (307) 840-4327

Home Address: 14547 HWY 287

Home City, State and Zip: Fort Washakie, WY 82514

Home Phone: (307) 840-4327



## I. Offices, Directorships and Employment

(Please use additional sheets as necessary.)

- a) List the *offices* held in business enterprises. This includes partnerships.

**Office Held**

**Name and Address of Enterprise**

N/A

- b) List any *directorship positions* held in business enterprises.

**Name of Enterprise**

**Address of Enterprise**

N/A

- c) Salaried Employment

**Job Title**

**Name and Address of Enterprise**

Consultant/Trainer/Grant Writer/Speaker

Andi Clifford Consulting &  
Training LLC

P.O. Box 2022

Princeton, WI 82501

## II. Sources of Income

(Please use additional sheets as necessary.)

a) Employment

Name of Employer

Address of Employer

self-employed  
\_\_\_\_\_  
\_\_\_\_\_

P.O. Box 2022  
Riverton, WY 82501  
\_\_\_\_\_

- b) Business Interests - list the names and addresses of all business entities in which you have a business interest (W.S. 9-13-108 (c) states: "Name and address of all business entities but excluding interests if less than ten percent (10%) of the entity is owned, or sole proprietorship from which income is earned. . . .")

Name of Business Entity

Address of Business Entity

N/A  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

c) Investments

Income Earned

A. Any security or interest earnings

☐ Yes ☒ No

B. Real estate, leases, royalties

☐ Yes ☒ No

d) Other (describe generally): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

On this 4th day of January, 2019, I affirm that the preceding information is accurate.

Andrea A. Clifford  
Signature